Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

TSL942 DIVZ

CLAIMS AS FILED - PART I									SMALL ENTITY			OTHER THAN		
				(Column 1)		(Colu	(Column 2)		TYPE		OR	SMALL ENTITY		
TOTAL CLAIMS			6					RATE	FEE		RATE	F	EE	
FOR				NUMBER FILED		NUMBER EXTRA		1	BASIC FEE	385.00	OR	BASIC FEE	77	0.00
TOTAL CHARGEABLE CLAIMS				6 minus 20=		• -			XS 9=		OR	X\$18=		
INDEPENDENT CLAIMS				/ minus 3 =]	X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESEN]	+145=		OR	+290=	1	
* If the difference in column 1 is less than zero, enter "0"						"0" in c	olumn 2		TOTAL		OR	TOTAL	フ	10
10	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							<u> </u>	SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAI REMAI AFTI AMEND	NING ER		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIO	DI- NAL EE
	Total	• Minus + 2		0	- 🔘		·X\$ 9=	•	OR	X\$18≖	/			
	Independent			Minus	1-3		· 0	1 [X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							, L	+145=	,	OR	+290=		
								L	TOTAL		OR	☆ TOTAL	4	7
		(O=1:	41		(Calcon	- A	(Caluma 2)		DDIT. FEE		, , ,	ADDIT. FEE		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								ר ו		ADDI-			- A C	DI-
AMENDMENT B	REMAININ AFTER AMENDME		ER		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIO	NAL E
	Total	•		Minus	** .	•	.	11	X\$ 9=		OR	X\$18=		
	Independent			Minus	***		-	1 [X43=		OR	X86=		
	FIRST PRESE	NTATION	OF MU	ILTIPLE DEF	ENDEN	CLAIM		┚╏	+145=		OR	+290=		
					•			.	TOTAL DDIT, FEE		OR ,	TOTAL ODIT, FEE		
		(Colum	n 1\			, , , , , , , , , , , , , , , , , , ,	. •	•	WOII. FEEE	•	\cdot			
3 L	`	CLAIMS REMAINING AFTER AMENDMENT		·	(Colum HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATĖ	ADDI- TIONAL FEE		RATE		DI- NAL
	Total	•		Minus	*		e	lF	X\$ 9=		OR	X\$18=		
	Independent	•		Minus	***		3		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										ן ייט			
				•					+145=		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***OF ADDIT. FEE ADDIT. FEE														
	f the "Highest Nur The "Highest Num								•	ropriate box				